

**CONTRACT REQUEST FORM (CRF)**

CEC-94 (Revised 09/10)

CALIFORNIA ENERGY COMMISSION



☐ New Contract      ☒ Amendment to Existing Contract: 200-07-004      Amendment Number: 7

Division	Contract Manager:	MS-	Phone	CM Training Date
200 Human Resources and Support Services	Emily Oren	3	916-654-4100	9/1/07

Contractor's Legal Name	Federal ID Number
Inter-Con Security Systems, Inc.	95-3020192

Title of Project
Inter-Con Security Systems

Term	Start Date	End Date	Amount
New/Original Contract	7 / 21 / 07	6 / 30 / 10	\$ 838,614

Line up the Amendment information as best as possible in the following boxes

Amendment #	End Date (mm/dd/yy)	Amount
7	December 31, 2011	\$110,000

### Business Meeting Information

Proposed Business Meeting Date	6/15/11	<input type="checkbox"/> Consent	<input checked="" type="checkbox"/> Discussion
Business Meeting Presenter	Emily Oren	Time Needed:	5 minutes

### Agenda Item Subject and Description

Possible approval of a contract amendment from July 1, 2011 - December 31, 2011. This amendment will increase the length of the contract. It will also add \$110,000.00 to the contract. This needs to be done because of the on going negotiations for the Master Service agreement with CHP.

**Business Meeting approval is not required for the following types of contracts:** *Executive Director's signature is required in all cases.*

- ☐ Contracts less than \$10k (*Policy Committee's signature is also required*)
- ☐ Amendment for a no-cost time extension. Must be first extension, less than one year and original contract less than \$100k.
- ☐ Contracts less than \$25k for Expert Witness in Energy Facility licensing cases and amendments.

### Purpose of Contract or Purpose of Amendment, if applicable

The original agreement is a three year contract for 24 hour unarmed security service for the California Energy Commission.

The purpose of this amendment is to extend the existing contract from the end date of June 30, 2011 - December 31, 2011 so that the negotiations can be completed concerning the master service agreement administered by CHP.

### California Environmental Quality Act (CEQA) Compliance

- Is Contract considered a "Project" under CEQA?
  - ☐ Yes: skip to question 2
  - ☒ No: complete the following (PRC 21065 and 14 CCR 15378):  
 Explain why contract is not considered a "Project":  
 Contract will not cause direct physical change in the environment or a reasonably foreseeable indirect physical change in the environment because \_\_\_\_\_.
- If contract is considered a "Project" under CEQA:
  - ☐ a) Contract **IS** exempt. (Draft NOE required)
    - ☐ Statutory Exemption. List PRC and/or CCR section number: \_\_\_\_\_
    - ☐ Categorical Exemption. List CCR section number: \_\_\_\_\_
    - ☐ Common Sense Exemption. 14 CCR 15061 (b) (3)  
 Explain reason why contract is exempt under the above section: \_\_\_\_\_
  - ☐ b) Contract **IS NOT** exempt. The Contract Manager needs to consult with the Energy Commission attorney assigned to their division and the Siting Office regarding a possible Initial Study.

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**Budgets Information**

Contract Amount Funded		Breakdown by FY			Funding Sources			
Funding Source	Amount	FY	Amount	Approved ?	Funding Source	FY	Budget List No.	Amount
ARFVTF	\$		\$	No	Funding Source			\$
ECAA	\$		\$	No	Funding Source			\$
State- ERPA	\$110,000	10/11	\$110,000	Yes	Funding Source	10/11	200-004	\$110,000
Federal	\$		\$	No	Funding Source			\$
PIER - E	\$		\$	No	Funding Source			\$
PIER - NG	\$		\$	No	Funding Source			\$
Reimbursement	\$		\$	No	Funding Source			\$
Other	\$		\$	No	Funding Source			\$
TOTAL: \$110,000		TOTAL:	\$110,000		TOTAL: \$110,000			
Reimbursement Contract #:					Federal Agreement #:			

Contractor's Administrator/ Officer		Contractor's Project Manager	
Name:	Neil Martau	Name:	Troy Miles
Address:	Inter-Con Security Systems, Inc. 210 DeLacy Avenue	Address:	Inter-Con Security System, Inc 2223 Watt Avenue, Suite 230
City, State, Zip:	Pasadena, CA 91105	City, State, Zip:	Sacramento, CA 95825
Phone/ Fax:	626-535-2210/626-685-9111	Phone/ Fax:	916-792-1883
E-Mail:	nmartau@icsecurity.com	E-Mail:	tmiles@icsecurity.com

**Contractor Is**

- ☒ Private Company (including non-profits)  
☐ CA State Agency (including UC and CSU)  
☐ Government Entity (i.e. city, county, federal government, air/water/school district, joint power authorities, university from another state)

**Selection Process Used**

- ☐ Solicitation MSA Solicitation #: - -  
☐ Non Competitive Bid (Attach CEC 96)  
☐ Exempt Select Exemption (see instructions)

**Civil Service Considerations**

- ☐ Not Applicable (Contract is with a CA State Entity or a membership/co-sponsorship)  
☐ Public Resources Code 25620, et seq., authorizes the Commission to contract for the subject work. (PIER)  
☐ The Services Contracted:  
☒ are not available within civil service  
☐ cannot be performed satisfactorily by civil service employees  
☐ are of such a highly specialized or technical nature that the expert knowledge, expertise, and ability are not available through the civil service system.  
☐ The Services are of such an:  
☐ urgent  
☐ temporary, or  
☐ occasional nature  
 that the delay to implement under civil service would frustrate their very purpose.

**Justification:****Payment Method**

- ☒ A. Reimbursement in arrears based on:  
☒ Itemized Monthly ☐ Itemized Quarterly ☐ Flat Rate ☐ One-time  
☐ B. Advanced Payment  
☐ C. Other, explain:

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**Retention**

1. Is contract subject to retention? ☒ No ☐ Yes  
 If Yes, Do you plan to release retention prior to contract termination? ☐ No ☐ Yes

**Justification of Rates****Disabled Veteran Business Enterprise Program (DVBE)**

1. ☒ Not Applicable  
 2. ☐ Meets DVBE Requirements DVBE Amount:\$ \_\_\_\_\_ DVBE %: \_\_\_\_\_  
     ☐ Contractor is Certified DVBE  
     ☐ Contractor is Subcontracting with a DVBE: \_\_\_\_\_  
 3. ☐ Requesting DVBE Exemption (attach CEC 95)

**Is Contractor a certified Small Business (SB), Micro Business (MB) or DVBE?**

- ☒ No ☐ Yes  
 If yes, check appropriate box: ☐ SB ☐ MB ☐ DVBE

**Is Contractor subcontracting any services?**

- ☒ No ☐ Yes  
 If yes, give company name and identify if they are a Small Business (SB), Micro Business (MB) and/or DVBE:  
 \_\_\_\_\_ ☐ No ☐ SB ☐ MB ☐ DVBE  
 \_\_\_\_\_ ☐ No ☐ SB ☐ MB ☐ DVBE  
 \_\_\_\_\_ ☐ No ☐ SB ☐ MB ☐ DVBE

**Miscellaneous Contract Information**

1. Will there be Work Authorizations? ☒ No ☐ Yes  
 2. Will there be IT expenditures? ☒ No ☐ Yes  
 3. Is the Contractor providing confidential information? ☒ No ☐ Yes  
 4. Is the contractor going to purchase equipment? ☒ No ☐ Yes  
 5. Check frequency of progress reports  
     ☐ Monthly ☐ Quarterly ☐ Daily Guard Report  
 6. Will a final report be required? ☒ No ☐ Yes  
 7. Is the contract, with amendments, longer than a year? If yes, why? ☒ No ☐ Yes

**The following items should be attached to this CRF**

- |   |   |                                   |
|---|---|-----------------------------------|
| 1. Scope of Work, Attach as Exhibit A.  | <input type="checkbox"/> N/A            | <input type="checkbox"/> Attached |
| 2. Budget Detail, Attach as Exhibit B.  | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Attached |
| 3. CEC 96, NCB Request                  | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Attached |
| 4. CEC 30, Survey of Prior Work         | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Attached |
| 5. CEC 95, DVBE Exemption Request       | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Attached |
| 6. Draft CEQA Notice of Exemption (NOE) | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Attached |
| 7. Resumes                              | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Attached |

\_\_\_\_\_  
Contract Manager\_\_\_\_\_  
Date\_\_\_\_\_  
Office Manager\_\_\_\_\_  
Date\_\_\_\_\_  
Deputy Director\_\_\_\_\_  
Date

The following signatures are only required when contract approval is delegated to the Executive Office and not approved at a Business Meeting.  
 See Business Meeting Information Section.

\_\_\_\_\_  
Presiding Policy Committee\_\_\_\_\_  
Date\_\_\_\_\_  
Associate Policy Committee\_\_\_\_\_  
Date\_\_\_\_\_  
Executive Director\_\_\_\_\_  
Date